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### Items of Interest:

**National Breast Cancer Awareness Month (NBCAM).** October is NBCAM and this year marks over 20 years of promoting breast cancer awareness. The American Cancer Society recommends monthly self-breast exams starting at the age of 20. A clinical breast exam should be done every three years until you turn 40. At that time, clinical breast exams should be scheduled for once a year. It is estimated over 200,000 women and 1,300 men are diagnosed with breast cancer each year. Though there are no defined reasons for the development of breast cancer, there are certain risk factors that can increase the likelihood of development of this type of cancer. One risk factor is a fellow family member who has had breast cancer. Another risk is age. Women over the age of 60 see an increase in their chances of developing breast cancer. For more information about breast cancer, visit [www.nih.gov](http://www.nih.gov).

# Navy and Marine Corps Medical News

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## Disaster Drill Measures 'Medical Megaplex' Response

By Chris Walz, National Naval Medical Center Public Affairs

**BETHESDA, Md.** - National Naval Medical Center (NNMC), in collaboration with the National Institutes of Health's Clinical Center and Suburban Hospital, hosted its largest mass casualty exercise Sept. 29 to test the hospitals' emergency response capabilities and interoperability.

The exercise emphasized a collaborative agreement that leaders from the three facilities signed at a press conference prior to the start of the exercise.

The official partnership now cre-

ates a unified working group that now shares its resources to provide unparalleled care to victims of a major disaster in the National Capital Area. Hospital leaders describe the linked three facilities as a newly created "medical megaplex."

"The hope is to create a template that will be followed throughout the country, so we can better take care of the citizens in our neighborhoods," said Rear Admiral Adam Robinson, National Naval Medical Center Commander.

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**VAZIANI MILITARY BASE, Republic of Georgia** - U.S. Navy medical technicians assess an injured civilian during a simulated man-made disaster during RESCUER/MEDCUER 05 (RM 05). The annual exercise is designed to improve interoperability among the 17 participating countries by conducting crisis response, disaster relief, consequence management, and humanitarian assistance operations. U.S. Air Force photo by Master Sgt. Steve Faulisi

## Hospital Corpsmen and Dental Technicians Join Forces to Provide Top Health Care



**WASHINGTON** — Bureau of Medicine and Surgery (BUMED) Force Master Chief (SW/AW) J.L.K. DiRosa (far right), Director, Medical Department Enlisted Personnel, takes time to acknowledge the work and service of four Dental Technicians (DT), who are now a part of the Hospital Corpsman (HM) rating community. This community combines both the DT and HM into one medical community. *U.S. Navy photo by Doris Ryan*

By Christine A. Mahoney, Bureau of Medicine and Surgery Public Affairs

**WASHINGTON** – The Navy Bureau of Medicine and Surgery (BUMED) marked the official establishment of the new Hospital Corpsman rating with a ceremony at Navy Medicine Headquarters Oct. 3. The new and improved rating represents the joining of the Hospital Corpsmen (HM) and Dental Technicians (DT) job specialties.

“The HM/DT merger is about combining forces to better meet the demands and needs of our changing Navy. With this merger, it will allow Navy Medicine to better support our operational forces by ensuring all enlisted personnel have the same baseline of training; by improving flexibility in the utilization of all enlisted manpower, and by improving career opportunities for all our Sailors,” said BUMED

Force Master Chief (SW/AW) J.L.K. DiRosa, director, Medical Dept. Enlisted Personnel.

The Chief of Naval Operations approved Navy Medicine’s proposal to merge the Hospital Corpsman and Dental Technician ratings Aug. 30, 2005. The focus of this merger will bring together the 27,000 HMs and the 3,000 DTs into one professional community – Hospital Corpsman. This merger will broaden their training requirements, increase their basic skills, provide advanced training in medical and dental specialty areas and optimally employ them for mission success.

Current HM and DT rated Sailors that are eligible for the E-9 active duty selection board was a combined (HM/DT) board. The 2006 E-8 and E-9 active duty and Re-

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## Naval Hospital Bremerton Steps up Education for Breast Cancer Awareness Month

By Journalist 2nd Class (SW) Fletcher Gibson, Naval Hospital Bremerton Public Affairs

**NAVAL HOSPITAL BREMERTON, Wash.** – Nationwide, one in eight women are at risk for breast cancer. For the month of October, Naval Hospital Bremerton (NHB) is taking advantage of Breast Cancer Awareness Month to help get the word out locally.

This year, the hospital’s health promotions office is focusing on educating potential victims on detection and treatment.

“We’re targeting women 40 or over, active duty or not,” said Jenni Osborne, the hospital’s women’s health educator.

Two “Lunch and Learns” will set the foundation for education of interested women and will feature discussions with the regional breast care coordinator, Fran McGregor. Both will last about an hour.

Health promotions has also started an aggressive program of birthday reminders for former patients over 50 years old to get them thinking about their annual exams.

“The biggest factor in getting breast cancer, unfortunately, is age,” said Osborne.

The National Cancer Institute suggests women over 40 get a mammogram every one to two years, and NHB helps women meet that goal by offering a breast cancer

prevention clinic every Thursday. This clinic combines counseling, a clinical breast exam and a mammogram all in one visit.

The Centers for Disease Control reports that, while detected cases of breast cancer are up, deaths from breast cancer are down, showing the effectiveness of early detection and treatment. The survival rate is now 94% for those who find it before it spreads.

“Early detection is key,” said Osborne. “With breast cancer, it’s not prevention; it’s detection.”



## Comfort, Local Doctors Establish Trauma Treatment Unit

From USNS Comfort Public Affairs

**NEW ORLEANS** - Medical staff on board USNS Comfort (T-AH 20) and local New Orleans physicians began treating trauma patients aboard the hospital ship Oct. 3 in a landmark partnership between the Navy and the Louisiana Department of Health and Hospitals.

The Memorandum of Understanding (MOU) between the Department of Defense (DoD) and the

Louisiana supervisory health government organization is a resource-sharing partnership to conduct humanitarian assistance/disaster relief operations.

The agreement is designed to help smooth the transition going from shipboard health care to civilian health care in local hospitals throughout the city of New Orleans.

"Now that the MOU is signed, credentialed doctors and nurses from the local community will be able to work aboard ship on an as-needed basis in Comfort's Military Treatment Facility (MTF). They will be working side by side with Navy physicians and nurses," said Capt. Thomas Allingham, Comfort MTF commanding officer.

The hospital ship has more than 600 medical and support personnel aboard to assist in the Federal Emergency Management Agency-led initiative to provide disaster relief to the Gulf Coast region.

Comfort leadership stated that, generally, they do not expect trauma patients to be on board for longer than 72 hours for treatment before being transported to local civilian hospitals for follow-on care as necessary.

Lt. Cmdr. Cherylynn Lillvik,

charge nurse on one of Comfort's medical surgical wards, said she expects to see a wide range of emergency treatments on board during this transition phase for the region.

"During re-population of the area, I expect us to treat injuries ranging from stepping on a nail at the site of a wrecked home, to falling from a roof during reconstruction; and, possibly, more serious injuries," said Lillvik. "On the wards we must deal with rampant infection before it creates a lot of damage in the body."

Comfort has unique capabilities for humanitarian relief missions including helicopter lift capability, advanced medical equipment, a wide range of medical skills, berthing and personnel support, as well as supplies to support medical operations ashore.

In addition to the 59 Sailors and 63 civil service mariners who make up the Reduced Operating Status (ROS) crew aboard the ship, the crew has been augmented with Sailors from the National Naval Medical Center in Bethesda, Md., the Naval Medical Clinic in Annapolis, Md., and several other Navy Military Treatment Facilities.



**NEW ORLEANS** - The Military Sealift Command (MSC) Hospital ship USNS Comfort (T-AH 20) prepares to pull into port at Naval Support Activity (NSA) East Bank, New Orleans. Comfort will serve as an emergency trauma center as the citizens begin to repopulate the city of New Orleans. U.S. Navy photo by Journalist 1st Class James Pinsky

## Disaster drill continued...

(Continued from page 1)

More than 4,000 NNMCC staff members participated in the drill. The disaster scenario included a virtual terrorist attack that incorporated a simulated release of the poison gas, anhydrous ammonia. Nearly 60 staff also played the role of "victims" on scene.

"The first responders were able to address the chemical release quickly, then start separating contaminated victims and non-contaminated victims," said Lt. Cmdr. Chris Gillette, department head for NNMCC's Emergency Preparedness Office. "They quickly set up what we call 'hot' and 'cold' zones, so they could treat the more serious patients first. They did a superb job of managing care."

The goals of the disaster drill included practicing emergency response efforts and logistical transportation of victims between the partnered medical facilities during a mass casualty situation. Communications was also a major focus on the exercise, as participating in the drill was also more than more than 20 emergency units, including local first responders from county fire and rescue services.

"It's important to test our systems considering everything going on in the world, especially down south with the weather-related issues," said NNMCC Assistant Fire Chief Patrick Fleming. "You need to make sure you know what resources are available to you...The partnership is...a win-win."



**BETHESDA, Md.** - A medic assesses a victim's injuries to determine what immediate care can be given and group him with other victims with similar injuries to expedite treatment. The Mass Casualty Exercise tested the response, treatment and communication interoperability between more than 20 emergency units. The event also solidified a working agreement between the National Naval Medical Center, the National Institutes of Health's Clinical Center, and Suburban Hospital. U.S. Navy photo by Chris Walz



## Corpsmen, Nurses Take to the Sky, Treat Fallen Marines

By Lance Cpl. Erin F. McKnight, Marine Corps Base, Camp Butler

**MARINE CORPS AIR STATION FUTENMA, OKINAWA, Japan** - More than 40 corpsmen and nurses from units all over Okinawa spent Sept. 26-28 learning about the En Route Care System (ERCS) during the 26-hour Naval En Route Care (NERC) course.

"The NERC course gives corpsmen and nurses an opportunity to be more familiar with the ERCS," said Lt. Cmdr. Tony P. Catanese, assistant director of Medical Lessons Learned, Naval Operations Medical Institute (NOMI), Pensacola, Fla. "The first time somebody touches the equipment shouldn't be when they actually have to use it on a casualty."

The course teaches methods of caring for critically wounded Marines who need medical attention during transportation from the point of injury to a medical facility, he said.

The NOMI-trained instructors came from various stateside commands and spent more than eight hours teaching students the basics about the ERCS and in-flight patient treatment.

The ERCS is compiled of equipment such as a vital signs monitor and a ventilator that monitors a patient's vital signs and helps keep them stable throughout the flight. It is attached to the casualty's stretcher and holds the system in place over the patient's body.

Instructors briefed students on the physiological issues of flight, such as how varying altitudes and helicopter movement patterns can affect a patient. They also covered how to manage critical injuries such as amputations, chest trauma and spinal injuries.

Students also got hands-on experience with the ERCS, and even practiced using stretchers to load dummies and equipment onto CH-46E Sea Knight helicopters. The instructors presented participants with real-world scenarios to help them learn how to react to different situations, explained Catanese.

"The course objectives are to instill critical thinking skills and teach them to use the equipment properly," Catanese said. "Not every patient is the same. It's definitely not 'textbook'."

The final day of training was the most critical, according to Lt. Scott E. Avery, the training officer for 3rd Medical Battalion.

The students boarded one of two Sea Knights manned by Marines with Marine Medium Helicopter Squadron 265, Marine Aircraft Group 36, 1st Marine Aircraft Wing. Students used stretchers to load dummies or fellow service members onto the helicopters, secured the stretchers inside the aircraft and took their seats for takeoff. Once the helicopters were airborne, students practiced new techniques using medical knowledge they gained from the class.

"Without that practical applica-



**MARINE CORPS BASE CAMP BUTLER, OKINAWA, Japan** — Navy Capt. Paula Crawford looks over a medical scenario with Hospital Corpsman 1st Class Reynaldo Datu during the Naval En Route Care course. U.S. Marine Corps photo by Lance Cpl. Erin F. McKnight

tion portion, this whole evolution would be useless," Avery said.

Teams trained by NOMI have already conducted NERC courses at Camp Lejeune, N.C., and Camp Pendleton, Calif., he added.



**YOKOSUKA, Japan** — Dental Officer Lt. Cmdr. Chad Lee, left, assigned to USS Blue Ridge (LCC 19) and Dental Technician 2nd Class Willie Smith IV demonstrate proper brushing technique at the 3rd annual USS Blue Ridge (LCC 19) Health Fair. The health fair gave Yokosuka Sailors an opportunity to learn about making healthy lifestyle choices and it also educated them on fitness resources at Fleet Activities Yokosuka, Japan. U.S. Navy photo by Photographer's Mate 3rd Class Tucker M. Yates

## Navy Plastic Surgery Recognized at National Convention

By Journalist 1st Class (SW) Joshua Smith, Naval Medical Center San Diego Public Affairs

**SAN DIEGO** - Military plastic surgery was a highlight of the American Society of Plastic Surgeon's annual convention held in Chicago, Sept. 24 to 26. Cmdr. James K. Amsberry, one of three Navy plastic surgeons attached to Naval Medical Center San Diego (NMCSD), and one of only nine in the entire Navy, attended the convention. He was accompanied by two of his patients, Marines Corps Sgt. Alexander Sargent and Cpl. Erik Hunt.

Amsberry discussed their cases and highlight the role of plastic surgery in the treatment of combat-related injuries. Both Sargent and Hunt required extensive plastic surgery after receiving combat-related injuries while serving in Operation Iraqi Freedom.

"Plastic surgery is a specialty that had its origins in wartime to help reconstruct patients with traumatic war injuries," said Amsberry. "Training and experience in reconstructive surgery is the foundation of the specialty and enables us to preserve limbs, restore function and improve the appearance of those who receive injuries in battle."

"Microsurgical techniques have been around for years which have enabled us to move tissue from one part of the body to another to cover exposed bones and reconstruct major defects," he explained. "More recently, advances in pre-surgical wound management such as the Vacuum Assisted Closure Device (VACD) have made major improvements in the management of traumatic wartime injuries. These devices are being placed on the wound shortly after the battle field injury and help to control the

wound and increase blood flow until definitive surgical care can be rendered."

The VACD promotes healing by uniformly drawing wounds closed by applying controlled, localized negative pressure, removing infectious material and promoting tissue flap and graft survival.

Both Marines wore the device to aid their wounds in healing after doctors at NMCSD performed a surgical procedure known as a free tissue transfer. This procedure involves the removal of a muscle group from one part of the body and placing it in another part, typically a damaged area of the body.

"I'm constantly amazed at the transformation my arm has undergone from that day I was first wounded up to now," said Sargent. "I'm confident that with the excellent care I've received, I will overcome this obstacle."

## Ratings merger continued...

(Continued from page 2)

serve selection boards will be combined boards. The combined E-7 exams and selection boards have also been approved for 2006. The first combined active duty petty officer advancement exam will happen in March 2006, and the combined Reserve petty officer exams will happen in August 2006.

Training for Sailors newly recruited into the Hospital Corpsman

field will combine both HM and DT job ratings skills. "There will be changes starting with the HM and DT 'A' schools. The revised HM 'A' school training plan incorporates foundational dental knowledge, skills and abilities. These classes will be added while keeping the HM 'A' school length to 14 weeks," said DiRosa. "Upon completion of HM 'A' school, designated personnel will attend a follow-on dental assistant school to train in specialized dental assisting skills. Hospital Corpsman training and education will continue at our Great Lakes, II., medical training facilities until otherwise decided."

Plans are in place to implement changes in the HM and DT "A" school curriculums, consolidate advanced "C" schools and cross train current HMs and DTs to prepare for the new merged advancement exams.

The DT/HM rating unification is



**WASHINGTON** — BUMED members of the new Hospital Corpsman rating recite the Hospital Corps pledge. U.S. Navy photo by Doris Ryan

expected to take place over the next two years. Once complete, all Navy Medicine DTs and HMs will be known as the HM community.



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